

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL090034	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 02/26/2016
---	---	--	--

NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

MONROE MANOR ASSISTED LIVING BUILDING

**1101 BAUCOM ROAD
MONROE, NC 28110**

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 166	Continued From page 1 hazards; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: Based on observation, a waste trap had been allowed to become dry. Dry waste traps allow noxious, combustible odors and possibly harmful bacteria to enter the facility. Findings include: The toilet trap was dry in the utility-eye wash room.	C 166	The toilet in the utility-eye wash area is checked weekly as a result of the survey, cleaned and flush to prevent the trap from becoming dry in the future. This has become part of the weekly house keeping routine to prevent this from occurring in the future.	3/22/16
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCA 13F .0309 PLAN FOR EVACUATION (b) There shall be rehearsals of the fire plan quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official. (c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on a review of documents, records were available onsite for only the last month of the rehearsals of the fire plan. At least 12 months of records must be maintained and available for review. 2. Based on a review of documents, the only	C 185	The fire and safety plan has been revised to incorporate a regularly scheduled drill on each shift. Also a new sheet has been adopted to allow for the names of the participants, drill scenario, date and other pertinent information. In addition, the alarms in the building will be sounded to familiarize residents, staff, and visitors of the emergency planning drill. Records will be maintained on site in a specified file/folder and readily available for inspection.	3/30/16 3/30/16 <i>ST</i>


Sharon Thompson

3/23/2016

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL090034	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 02/26/2016
---	---	--	--

NAME OF PROVIDER OR SUPPLIER MONROE MANOR ASSISTED LIVING BUILDING	STREET ADDRESS, CITY, STATE, ZIP CODE 1101 BAUCOM ROAD MONROE, NC 28110
--	---

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments Report of Biennial Construction Survey by Dennis Harrell on 2-26-2016. Records indicate this facility was first licensed as a Home for the Aged serving 12 residents on 7-21-1988. Therefore the facility must meet the 1987 Rules for Adult Care Homes, the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes of Seven or More Beds and, the 1978 North Carolina State Building Code, Section 409 Institutional Occupancy. Deficiencies were noted which will require a Plan of Correction.	C 000		
C 111	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: Based on a review of documents, a current fire and building safety inspection report was not available in the home for review.	C 111	A current sanitation report dated 7/25/15 was found and is available for review. The Fire Marshall will be notified to conduct a Fire Inspection. The Fire Marshall will be notified each year by the end of the first quarter if an 3/30/16 inspection has not been conducted to prevent future issues with compliance.	
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and	C 166		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____

TITLE _____

(X6) DATE _____



3/23/2016

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL090034	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 02/26/2016
NAME OF PROVIDER OR SUPPLIER MONROE MANOR ASSISTED LIVING BUILDING		STREET ADDRESS, CITY, STATE, ZIP CODE 1101 BAUCOM ROAD MONROE, NC 28110		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 185	Continued From page 2 records available onsite included no description of what the rehearsal involved. 3. Based on interview, the facility staff has been conducting all fire drills without the use of the fire alarm system. Staff stated that they just get together and discuss what to do in the event of a fire. Fire drills should be spontaneous and must be conducted using the fire alarm system so the staff and residents will be trained to respond and evacuate to the sound of the fire alarm system.	C 185	The fire and safety plan has been revised to incorporate a regularly scheduled drill on each shift. Also a new sheet has been adopted to allow for the names of the participants, drill scenario, date and other pertinent information. In addition, the alarms in the building will be sounded to familiarize residents, staff, and visitors of the emergency planning drill. In addition, the alarm monitoring company will be notified during fire drills to place the system in a "TEST" mode for a specified period while the drills are being conducted.	3/30/16
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the heat detector in the clean linen closet was severely damaged and must be replaced. 2. Based on observation the required one-hour fire rated ceiling was compromised in the water heater room. Holes and penetrations that are not sealed with materials approved for use in one-hour fire rated construction present the possibility that a fire that begins in one space can quickly spread to other areas of the facility.	C 189	A new heat detector will be ordered and installed. As part of an ongoing maintenance plan all heat detectors will be checked for functionality on a quarterly basis. The holes and other penetrations will be sealed with an approved UL listed sealant and checked on a quarterly basis for penetrations that can compromise the safety of the building	3/30/16 3/30/16

Shawn Thompson

3/23/2016

ST